



JCA-UST-010

Compliance Inspection **Sampling Activities by Removal of UST System**

LUST

NO LUST

Inspection date: _____ **EQB employee who performs the inspection:** _____ **UST - 2 -**

OBJECTIVES

1. Observe the implementation of health and safety measures during field activities, including security control in place. Verify that the Health and Safety Plan is carried out in accordance with the EQB's UST Permanent Closure Guide during all field activities, daily meetings to discuss safety measures, use of personal protective equipment and demarcation of the work area for the protection of the employee and the public in general.
2. Verify that all elements of the EQB's UST Permanent Closure Guide are properly implemented.
3. Verify that quality control and certainty (QA/QC) protocols, including equipment decontamination, sampling, frequency of quality control sampling, water quality for the blanks, and the calibration of the field instruments are duly implemented.
4. Verify that the data generated from the field activities and the sampling activities are valid scientifically and legally defensible.
5. Verify that the Sop's used for sampling and decontaminating equipment are correctly implemented.
6. Observe the field activities to identify potential errors related to sampling and sending samples including: sampling design, sampling methodology, sample heterogeneity, management and custody of the sample (s).
7. Identify the need to implement corrective action.

INSTRUCTIONS:

1. Inspection photos should be attached to this report.
2. If the sampling points are different from the diagram, a sketch must be made on the corresponding sheet.
3. The EQB Technician is authorized to make decisions that facilitate the sampling work and that do not affect what is established in the Permanent Closure Guide. It is not authorized to make modifications or to intervene in the decisions that pertain to the petitioner and/or specialized personnel. In case of reasonable doubt you should contact your immediate supervisor and/or the WQA Manager.

GENERAL INFORMATION

1. Project's name:

2. Physical address:

3. No. UST:

4. Contractor:

(Name of the Company)

5. Project manager:

6. Name of the Inspector:

7. Scheduled Date Activity:

Start date

Finish date

Type of activity to be carried out	Special conditions during sampling
<input type="checkbox"/> Degassing tanks <input type="checkbox"/> Installation of groundwater monitoring wells <input type="checkbox"/> Proof of integrity of the tanks and lines <input type="checkbox"/> Removal of fluids or product of the pit <input type="checkbox"/> Removal of residual fluids and fluid resulting from tank washing <input type="checkbox"/> Closure on site <input type="checkbox"/> Removal of concrete or soil <input type="checkbox"/> Field sampling phase <input type="checkbox"/> Removal of tanks and/or pipelines <input type="checkbox"/> Permanent pit closure <input type="checkbox"/> Remediation <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Weather conditions: <input type="checkbox"/> Sunny <input type="checkbox"/> Cloudy <input type="checkbox"/> Rain <input type="checkbox"/> Other: _____ Temp: _____ <input type="checkbox"/> Obstacles present at the time of sampling: _____ <input type="checkbox"/> Access denied <input type="checkbox"/> Difficult access to the area by: <input type="checkbox"/> Collapse <input type="checkbox"/> Vehicular accident <input type="checkbox"/> Mechanical failure <input type="checkbox"/> Other: _____ <input type="checkbox"/> Sampling personnel not in the area <input type="checkbox"/> Lack of equipment and / or materials to perform sampling <input type="checkbox"/> Lack of documentation required by EQB to perform the sampling activities <input type="checkbox"/> Dangerous conditions in the area: _____ <input type="checkbox"/> Sampling and removal of the UST performed without representation of the EQB <input type="checkbox"/> Other: _____ It was necessary to cancel the sampling due to the situation indicated <input type="checkbox"/> Yes <input type="checkbox"/> No Explain: _____ _____ Work resumed? <input type="checkbox"/> Yes <input type="checkbox"/> No Explain: _____ _____ _____ _____

Personnel in the project		
Name	Agency / Company	Position

Required documentation	YES	NO*	N/A
Copy of the Closure Plan for UST of EQB			
* Why?			
Copy of the Closure Authorization issued by the WQA			
* Why?			
General Permit for other works			
* Why?			
Access permission duly signed			
* Why?			
Field notebook			
* Why?			
Appropriate Chain of Custody Sheets			
No. Custody Sheets (sequential):			
* Why?			
Notebook or calibration sheet of field instruments			
* Why?			
Health and Safety	YES	NO*	N/A
Health and Safety Officer in the project:			
Does the corresponding talk on health and safety protocols was made to all personnel? (Annex 7 of the Permanent Closure Guide)			
* Why?			
Did each person who works in the area or who visits the area beyond the cleaning/security zone sign the knowledge and safety plan sheet? (Annex 2 of the Permanent Closure Guide)			
* Why?			
Did each person who works in the area or who visits the area signed the visiting sheet? (Annex 3 of the Permanent Closure Guide)			
* Why?			
Is the use of personal protective equipment in accordance with the levels of protection established in the Permanent Closure Guide?			
* Why?			
Exposure information according to OSHA placed in a visible place?			
* Why?			
The work areas are demarcated with signs or something visible for:			
<input type="checkbox"/> Clean area			
<input type="checkbox"/> Decontamination zone			
<input type="checkbox"/> Exclusion zone			
* Why?			
Is the list of contacts and emergency numbers available? (Annex 4 of the Permanent Closure Guide)			
* Why?			
Is the emergency equipment accessible and listed according to Annex 5 of the Permanent Closure Guide?			
* Why?			
Was there an accident during the removal work?			
* Why?			
Was Annex 6 of the Permanent Closure Guide completed to report that accident?			
* Why?			
Was the traffic control adequate and as established in the Permanent Closure Guide?			
* Why?			

Site conditioning, excavation, tank and pipe removal	YES	NO*	N/A
Defined work areas?			
* Why?			
Was slab demolition and soil excavation inspected?			
* Why?			
All heavy equipment was visually inspected prior to starting the day's work, to determine the possible presence of oil stains and vapors from these that could affect the collection of samples and the analytical results?			
* Why?			
Was soil tracking conducted by instrument (PID) to establish the existence of vapor concentrations of Volatile Organic Compounds (VOC)?			
* Why?			
Was the equipment (PID) properly calibrated? Was the calibration document verified?			
* Why?			
Was the soil showing detectable concentrations of organic vapors separated from non-impacted material and properly disposed?			
* Why?			
All the PID readings were recorded in the corresponding format? (Annex 1 in the Permanent Closure Guide)			
* Why?			
Was there any reading above twenty-five percent (25%) of the Lower Explosive Limits (LEL)?			
* Why?			
Was it necessary to notify the Fire Department or what precautionary measure were taken?			
* Why?			
Was the product removal verified in Pipes and Tanks?			
* Why?			
The procedures used to remove the product in tanks and pipes were in accordance with established procedures?			
* Why?			
Was all the contents of the tank deposited in 55-gallon or other containers, sealed, clearly identified, properly stored and disposed of as hazardous material?			
* Why?			
Was the tank de-gasified? Degassing method:			
* Why?			
Removal of pipes and tanks was observed?			
* Why?			
From the inspection of the tank and its connections it is observed that they have visible damage by: <input type="checkbox"/> Filtration as a result of corrosion <input type="checkbox"/> Wear of the lines <input type="checkbox"/> Metal separation <input type="checkbox"/> Structural failures of welds and joints <input type="checkbox"/> Others, Which:			
The removed tank can NOT be used again as a storage tank. Was the tank mutilated with perforations and or cuts?			
* Why?			
The excavation area was thoroughly inspected and found: <input type="checkbox"/> Soil discoloration <input type="checkbox"/> Presence of free product <input type="checkbox"/> Emissions of vapors <input type="checkbox"/> Presence of water <input type="checkbox"/> Others, Which:			
* Why?			
Before taking samples	YES	NO*	N/A
Are the locations of the sampling points demarcated and representative of the conditions of the site? (Indicate it in the sampling point diagram)			
* Why?			
Does the bottom of the excavation have a presence of water? A sample of the bottom will be collected in duplicate and the soil samples will be collected 1 to 3 feet from bottom to top above the water level.			
* Why?			

How are the conditions of the coolers? <input type="checkbox"/> Filtration <input type="checkbox"/> Badly sealed <input type="checkbox"/> Dirty <input type="checkbox"/> In good condition <input type="checkbox"/> With enough ice <input type="checkbox"/> Contains a thermometer at 4oC ± 2oC in a bottle with water <input type="checkbox"/> Others, which:					
QA / QC samples are present? Field Blank <input type="checkbox"/> Yes <input type="checkbox"/> No (One for each day of sampling and by matrix)** Trip Blank <input type="checkbox"/> Yes <input type="checkbox"/> No (One per sampling day and per cooler)** Equipment Blank <input type="checkbox"/> Yes <input type="checkbox"/> No (N/A if are disposable or dedicated equipment) ** It must be opened during the process of taking one of the sampling points for the volatiles and closing immediately after finishing each sample at that point. *** It must remain inside the cooler and be delivered in conjunction with the samples collected, to the laboratory hired.					
What equipment was used to collect the water samples: <input type="checkbox"/> Teflon bailer <input type="checkbox"/> Peristaltic pump <input type="checkbox"/> Dipper <input type="checkbox"/> Stainless steel container <input type="checkbox"/> Other:					
What equipment was used to collect the soil samples: <input type="checkbox"/> Spatulas: <input type="checkbox"/> Stainless steel <input type="checkbox"/> "Carbon Steel" <input type="checkbox"/> Dedicated <input type="checkbox"/> No Dedicated <input type="checkbox"/> Disposable spatulas <input type="checkbox"/> Hand Auger <input type="checkbox"/> Mechanical shovel (Digger) <input type="checkbox"/> Drill or borer <input type="checkbox"/> Mango Form T <input type="checkbox"/> Other:					
After sampling			YES	NO*	N/A
Do the sample containers have the labels ("labels") previously stuck, waterproof and filled in all their parts? (sample number, matrix, type of sample, preservative, collector signature, date, time, etc.)					
* Why?					
Check that the chain of custody information corresponds to the samples taken.					
* Why?					
Verify that the chain of custody is filled in all its parts as appropriate and signed.					
* Why?					
Check the temperature of the cooler before being sent to the laboratory.					
* Why?					
Was the pit filled with pollution-free material, compatible with existing and compactable land?					
* Why?					
Was all the land removed from the excavations arranged in accordance with what was indicated in the closure application of the project?					
* Why?					
During the sampling					
SPECIAL CONSIDERATIONS: <ul style="list-style-type: none"> - Each sample must be deposited in the ice-cooler immediately the same was taken. - Duplicate samples should be taken simultaneously or immediately one after the other. - The samples have to be deposited in Ziploc plastic bags by parameter and by matrix. - The samples will be collected in a Grab (fortuitous) way. - After collecting the samples at each sampling point, they should be stored immediately in the cooler to be preserved at the regulatory temperature of 4°C ± 2°C. - Take field duplicates (1 duplicate for every 10 samples, 2 for every 20, 3 for every 30, and so on). - Do not rinse any of the bottles, especially those containing preservatives. - No bubbles or air spaces should be left in the container containing the sample in the case of VOCs. - The EQB technician cannot sign the Chain of Custody. 					

[illegible]

FIELD DATA

[illegible]

Use of Preservatives:

Use of Preservatives: *HCl, pH<2 ☐ Yes ☐ No **Na₂S₂O₃ ☐ Yes ☐ No ♣HNO₃, pH<2 ☐ Yes ☐ No

Diagram or Sketch

Draw the actual excavation, as it was done and Specify the sampling points

☐ Sampling photographs were taken
(Attach them to this form or submit them in digital format)

☐ Sampling photographs were not taken
Why? _____

EQB Inspector Comments

- ☐ No deficiencies and/or observations were observed upon completion of the Closure Inspection of Underground Storage Tanks (UST).
- ☐ The facility in reference was duly inspected by an inspector and the following are the observations of the inspector and recommended corrective action (s):

Additional observations and recommended action (s) (if applicable):

[illegible]

Name of the Inspector who performs the inspection:

Mold Letter

Signature

Inspection Date: _____